# Case 16-81701 Doc 1 Filed 07/15/16 Entered 07/15/16 15:37:56 Desc Main Document Page 1 of 50

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Artasia	
	pictu	your government-issued picture identification (for example, your driver's license or passport).	First name	First name
	licer		Middle name	Middle name
		g your picture	Leonard	
		identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-2272	

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Case number (if known)

Debtor 1 Artasia Leonard

		About Debtor 1:	A	bout Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	В	usiness name(s)		
		EINs	E	INs		
5.	Where you live		If	Debtor 2 lives at a different address:		
		2221 Canary Dr. Apt 3 Rockford, IL 61103				
		Number, Street, City, State & ZIP Code	N	lumber, Street, City, State & ZIP Code		
		Winnebago				
		County	C	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	ir	Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	N	lumber, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	c	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)		
			_			

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Case number (if known) Debtor 1 Artasia Leonard

chapter of the kruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7					
osing to file under						
	☐ Chapte	er 11				
	☐ Chapte	er 12				
	☐ Chapte	er 13				
you will pay the fee	abo orde	out how yo	u may pay. Typically, if you are pattorney is submitting your paym	paying the fee	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money ehalf, your attorney may pay with a credit card or check with	
			the fee in installments. If you in Installments (Official Form 1		otion, sign and attach the Application for Individuals to Pay	
		_	,	•	tion only if you are filing for Chapter 7. By law, a judge may,	
	but app	is not required	ired to, waive your fee, and ma r family size and you are unable	y do so only if to pay the fee	your income is less than 150% of the official poverty line that is in installments). If you choose this option, you must fill out fficial Form 103B) and file it with your petition.	
e you filed for	■ No.					
kruptcy within the 8 years?	☐ Yes.					
•		District	V	Vhen	Case number	
		District		Vhen	Case number	
		District	V	Vhen	Case number	
any bankruptcy	■ NI.					
es pending or being	■ No					
I by a spouse who is filing this case with , or by a business ner, or by an iate?	☐ Yes.					
		Debtor			Relationship to you	
		District	V	Vhen	Case number, if known	
		Debtor			Relationship to you	
		District	V	Vhen	Case number, if known	
ou rent your	□ No.	Go to	ne 12.			
dence?	Yes	Has yo	ır landlord obtained an eviction	judgment agai	inst you and do you want to stay in your residence?	
	. 00.		No. Go to line 12.			
		_	Yes. Fill out <i>Initial Statement Al</i>	oout an Evictio	on Judgment Against You (Form 101A) and file it with this	
	ou rent your ence?		ou rent your	ou rent your ence?  No. Go to line 12.  Has your landlord obtained an eviction  No. Go to line 12.	Du rent your	

Document Page 4 of 50 Case number (if known) Debtor 1 Artasia Leonard Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Artasia Leonard

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Artasia Leonard		Document	raye o oi so	Case number (if kn	own)
Part	6: Answer These Ques	stions for Repo	rting Purposes			
16.	What kind of debts do you have?	16a. <b>A</b> r				n 11 U.S.C. § 101(8) as "incurred by an
			No. Go to line 16b.			
			Yes. Go to line 17.			
			e your debts primarily busines oney for a business or investmen			
			No. Go to line 16c.			
			Yes. Go to line 17.			
		16c. Sta	ate the type of debts you owe that	at are not consumer de	bts or business deb	ots
17.	Are you filing under Chapter 7?	□ No. la	m not filing under Chapter 7. Go	to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses		— 103. are	m filing under Chapter 7. Do you e paid that funds will be available No			s excluded and administrative expenses
	are paid that funds will be available for distribution to unsecure creditors?		Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	\$0 - \$50,0 \$50,001 - \$100,001 \$500,001	\$100,000 - \$500,000	□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50	million 0 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,0 ■ \$50,001 - □ \$100,001 □ \$500,001	\$100,000 - \$500,000	□ \$1,000,001 - \$10 n □ \$10,000,001 - \$50 □ \$50,000,001 - \$100 □ \$100,000,001 - \$50	million 0 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part	:7: Sign Below					
For	you	I have exami	ned this petition, and I declare u	nder penalty of perjury	that the information	n provided is true and correct.
			sen to file under Chapter 7, I am s Code. I understand the relief a			er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.
			represents me and I did not pay nave obtained and read the notic			attorney to help me fill out this
		I request relie	ef in accordance with the chapte	r of title 11, United Stat	es Code, specified	in this petition.
		bankruptcy c and 3571.	ase can result in fines up to \$25			perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Artasia Artasia Lec Signature of	onard	Signa	ature of Debtor 2	
		Executed on	July 15, 2016 MM / DD / YYYY	Exec	uted on MM / DD	/YYYY

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Debtor 1 Artasia Leonard Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel	A. Springer	Date	July 15, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Daniel A. S	Springer		
Springer L	₋aw Firm		
Firm name			
2222 E Sta	ate St		
Suite 107			
Rockford,	IL 61104		
Number, Street,	City, State & ZIP Code		
Contact phone	815.312.4725	Email address	dspringerlaw@gmail.com
6314059			
Bar number & S	tate		<del></del>

		1200.11111	an Paue o ul su	
Fill in this infor	mation to identify your	case:		
Debtor 1	Artasia Leonard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Charlettelia in an
(II KNOWN)				☐ Check if this is an amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,682.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,682.00
Pa	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	12,679.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,500.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	35,912.9
	Your total liabilities	\$	50,091.98
Pa	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,875.98
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,770.2
Pa:	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Case number (if known) Debtor 1 Artasia Leonard

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,187.05

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	1,500.00

			Docum	ent Page 10 of 50		
Fill in	this inforr	mation to identify your	case and this filing:			
Debto	r 1	Artasia Leonard				
		First Name	Middle Name	Last Name		
Debto						
(Spouse	, if filing)	First Name	Middle Name	Last Name		
United	l States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
_						
Case	number _					☐ Check if this is an
						amended filing
Offic	cial Fo	rm 106A/B				
Sok	odul	o A/R: Prop	ortv			40/45
		e A/B: Prop				12/15
hink it nforma	fits best. B	e as complete and accura e space is needed, attach	ate as possible. If two marri	once. If an asset fits in more than ed people are filing together, both rm. On the top of any additional pa	are equally responsible for s	supplying correct
Part 1:	Describe	Each Residence, Building	g, Land, or Other Real Estat	e You Own or Have an Interest In		
Do	OU 0000 55 1	2240 204   220   22 - 22 - 14 - 1-1	o intorost in any residence	building, land, or similar property?	•	
. Бо у	ou own or i	have any legal or equitable	e interest in any residence,	building, land, or similar property	•	
■ N	o. Go to Par	t 2.				
ПΥ	es. Where i	s the property?				
	_					
Part 2:	Describe	Your Vehicles				
3. Car □ N ■ Y	lo	ucks, tractors, sport u	tility vehicles, motorcyc	les		
3.1	Make:	Chevy	Who has an inte	erest in the property? Check one		claims or exemptions. Put
0	_	Cruze	■ Debtor 1 only			red claims on Schedule D: aims Secured by Property.
		2012	Debtor 2 only			
	Approximat		,000 Debtor 1 and		Current value of the entire property?	Current value of the portion you own?
	Other inform	nation:		of the debtors and another		
	Car				<b>*</b>	<b>.</b>
				is community property	\$6,425.00	\$6,425.00
L			(see instruction			
Exal  N Y  Add  page	mples: Boa do des d the dolla ges you ha	ts, trailers, motors, persons	onal watercraft, fishing ve you own for all of your e . Write that number here	entries from Part 2, including an	ny entries for	\$6,425.00
Do yo		, , ,		ic following items.		portion you own?  Do not deduct secured

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Debtor 1	Artasia Leon	Document Page 11 of 50	
■ Yes.	Describe		
		Couch, Loveseat,Bed	\$400.00
□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; phones, cameras, media players, games	; music collections; electronic devices
		Two TV's	\$850.00
Example  ☐ No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ons, memorabilia, collectibles	mp, coin, or baseball card collections;
		Two Hundred DVD's, Home Decor	\$250.00
■ No □ Yes.  10. Firearm Examp. ■ No □ Yes.  11. Clothes Examp. □ No	musical instruction musical instruction  Describe  Is a second of the control of the co	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
		Used Clothing	\$700.00
□ No É		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches  Watch , Earrings	, gems, gold, silver\$60.00
■ No	m animals les: Dogs, cats,	birds, horses	
■ No	ner personal an	d household items you did not already list, including any health aids you did no ormation	ot list
		of all of your entries from Part 3, including any entries for pages you have attac number here	\$2,260.00

Official Form 106A/B

Document Page 12 of 50 Case number (if known) Debtor 1 Artasia Leonard Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash \$8.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **Chase Bank** \$100.00 17.1. Checking **Chase Bank** \$0.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **American Trust** Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... Utility \$191.00 Comcast

Official Form 106A/B

Landlord

\$610.00

Rental deposit

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Case number (if known)

Document Debtor 1 Artasia Leonard

	Electric	ComEd		\$88.00
23. <b>Annuities</b> (A cont	tract for a periodic payment o	of money to you, either for life	e or for a number of years)	
☐ Yes	Issuer name and descrip	otion.		
	lucation IRA, in an account b)(1), 529A(b), and 529(b)(1		am, or under a qualified state tuition	program.
Yes	Institution name and des	scription. Separately file the r	records of any interests.11 U.S.C. § 52	1(c):
25. Trusts, equitable  ■ No	or future interests in prop	erty (other than anything li	isted in line 1), and rights or powers	exercisable for your benefit
	ific information about them			
		rets, and other intellectual proceeds from royalties and		
☐ Yes. Give spec	ific information about them			
	ises, and other general int ng permits, exclusive license		oldings, liquor licenses, professional lic	eenses
☐ Yes. Give spec	ific information about them			
Money or property o	owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owe	d to you			
■ No □ Yes. Give speci	fic information about them, i	ncluding whether you already	filed the returns and the tax years	
29. Family support  Examples: Past of	due or lump sum alimony, sp	ousal support, child support,	maintenance, divorce settlement, prop	perty settlement
Yes. Give speci	fic information			
benef			s, sick pay, vacation pay, workers' cor	npensation, Social Security
■ No □ Yes. Give spec	ific information			
31. Interests in insur  Examples: Health  □ No		health savings account (HS	A); credit, homeowner's, or renter's ins	urance
Yes. Name the	insurance company of each Company name:		Beneficiary:	Surrender or refund value:
	Term Policy T	hrough work	Tawana Leonard	\$0.00
			rance policy, or are currently entitled to	receive property because
■ No □ Yes Give spec	the telegraphic			

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Case number (if known) Debtor 1 Artasia Leonard 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$997.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6 ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$6,425.00 57. Part 3: Total personal and household items, line 15 \$2,260.00 58. Part 4: Total financial assets, line 36 \$997.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

Total of all property on Schedule A/B. Add line 55 + line 62

62. Total personal property. Add lines 56 through 61...

\$9,682.00

\$9,682.00

\$9,682.00

Copy personal property total

Fill in this information to identify your case:
Debtor 1 Artasia Leonard
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$6,425.00		\$2,400.00	735 ILCS 5/12-1001(c)	
		100% of fair market value, up to any applicable statutory limit		
\$400.00		\$400.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$850.00		\$850.00	735 ILCS 5/12-1001(b)	
		100% of fair market value, up to any applicable statutory limit		
\$250.00		\$250.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
\$700.00		\$700.00	735 ILCS 5/12-1001(a)	
		100% of fair market value, up to any applicable statutory limit		
	\$6,425.00 \$400.00 \$250.00	\$6,425.00	Check only one box for each exemption.  \$6,425.00  \$100% of fair market value, up to any applicable statutory limit  \$400.00  \$100% of fair market value, up to any applicable statutory limit  \$850.00  \$2,400.00  \$400.00  \$400.00  \$100% of fair market value, up to any applicable statutory limit  \$850.00  \$100% of fair market value, up to any applicable statutory limit  \$250.00  \$250.00  \$100% of fair market value, up to any applicable statutory limit  \$700.00  \$700.00  \$100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

Altasia Leoliaiu		Case number (ii known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
Watch , Earrings Line from Schedule A/B: 12.1	\$60.00	\$60.00	735 ILCS 5/12-1001(a)
Life Hotti Schedule AVD. 12.1		☐ 100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$8.00	■ \$8.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale Av.B. 1911		☐ 100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Line from Schedule A/B: 17.1	\$100.00	<b>\$100.00</b>	735 ILCS 5/12-1001(b)
Elle Holli Genedale Av.B. 1711		☐ 100% of fair market value, up to any applicable statutory limit	
Savings: Chase Bank Line from Schedule A/B: 17.2	\$0.00	\$0.00	735 ILCS 5/12-1001(b)
Life from Schedule A/B. 11.2		100% of fair market value, up to any applicable statutory limit	
401(k): American Trust	Unknown	<b>1</b> 00%	735 ILCS 5/12-1006
Lille Hotti Schedule A/B. 21.1		100% of fair market value, up to any applicable statutory limit	
Utility: Comcast Line from Schedule A/B: 22.1	\$191.00	<b>\$191.00</b>	735 ILCS 5/12-1001(b)
Line from Scriedule A/B. 22.1		100% of fair market value, up to any applicable statutory limit	
Rental deposit: Landlord Line from Schedule A/B: 22.2	\$610.00	<b>\$610.00</b>	735 ILCS 5/12-1001(b)
Lille Hotti Schedule AVD. 22.2		100% of fair market value, up to any applicable statutory limit	
Electric: ComEd Line from Schedule A/B: 22.3	\$88.00	\$88.00	735 ILCS 5/12-1001(b)
Elle Holli Genedale Av.B. 2216		☐ 100% of fair market value, up to any applicable statutory limit	
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  ■ No  □ Yes. Did you acquire the property cover  □ No	3 years after that for ca		•

ш	n this information to ide	ntify your c	ase:			
Deb	tor 1 Artasia I	_eonard				
	First Name		Middle Name Last Name		-	
	tor 2				-	
(Spou	se if, filing) First Name		Middle Name Last Name			
Unit	ed States Bankruptcy Cou	rt for the:	NORTHERN DISTRICT OF ILLINOIS		-	
Cas	e number					
(if kno					☐ Check	if this is an
					amend	ded filing
<b>∠</b> tt:	oial Farm 100D					
	cial Form 106D					
SC	nedule D: Cred	litors V	Vho Have Claims Secure	ed by Propert	У	12/15
s nee	eded, copy the Additional Pa er (if known).	nge, fill it out,	number the entries, and attach it to this form.			
_	any creditors have claims s					
		submit this	form to the court with your other schedules.	You have nothing else t	to report on this form.	
	Yes. Fill in all of the info	rmation held	JW.			
		mation box	JVV.			
Part	1: List All Secured Cl		JW.			
2. Li:	st all secured claims. If a cre	laims editor has more	e than one secured claim, list the creditor separate		Column B	Column C
<b>2. Li</b> :	st all secured claims. If a creach claim. If more than one cr	ditor has more		ely	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
<b>2. Li</b> s	st all secured claims. If a creach claim. If more than one cr	ditor has more reditor has a paralphabetical of	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
<b>2. Li</b> : for ea	st all secured claims. If a cre ach claim. If more than one co as possible, list the claims in First Northern Credit	ditor has more reditor has a palphabetical of the control of the c	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As proder according to the creditor's name.  escribe the property that secures the claim:  112 Chevy Cruze 68,000 miles	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2. Li</b> stor ear	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De	ditor has more reditor has a palphabetical of the control of the c	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2. Li</b> : for ea	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De 230 W Monroe St	daims  ditor has more reditor has a palphabetical of the control o	e than one secured claim, list the creditor separate articular claim, list the other creditors in Part 2. As order according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  car  s of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2. Li</b> : for ea	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De	ditor has more reditor has a palphabetical of the p	e than one secured claim, list the creditor separate larticular claim, list the other creditors in Part 2. As order according to the creditor's name.  Describe the property that secures the claim:  D12 Chevy Cruze 68,000 miles  Car  S of the date you file, the claim is: Check all that ply.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for ear much	st all secured claims. If a creach claim. If more than one creach claims in as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De 230 W Monroe St Suite2850	editor has more reditor has a parallel alphabetical of the control	e than one secured claim, list the creditor separate articular claim, list the other creditors in Part 2. As order according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  car  s of the date you file, the claim is: Check all that	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
<b>2. Li</b> stor ear	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name  Attn: Bankruptcy De 230 W Monroe St Suite2850 Chicago, IL 60606	daims  ditor has more reditor has a palphabetical of the palphabetical o	e than one secured claim, list the creditor separate articular claim, list the other creditors in Part 2. As order according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  car  s of the date you file, the claim is: Check all that ply.  1 Contingent	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List for earmuch	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name  Attn: Bankruptcy De 230 W Monroe St Suite2850 Chicago, IL 60606	ditor has more reditor has a parallel alphabetical of the parallel alphabe	e than one secured claim, list the creditor separate carticular claim, list the other creditors in Part 2. As proder according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  car  s of the date you file, the claim is: Check all that ply.  1 Contingent  1 Unliquidated	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for ea much	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De 230 W Monroe St Suite2850 Chicago, IL 60606 Number, Street, City, State & Zip	editor has more reditor has a palphabetical of the	e than one secured claim, list the creditor separate articular claim, list the other creditors in Part 2. As order according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  car  s of the date you file, the claim is: Check all that ply.  1 Contingent 1 Unliquidated 1 Disputed	Amount of claim Do not deduct the value of collateral. \$12,679.00	Value of collateral that supports this claim	Unsecured portion If any
2. Li: for ea much 2.1	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De 230 W Monroe St Suite2850 Chicago, IL 60606 Number, Street, City, State & Zip owes the debt? Check one	editor has more reditor has a palphabetical of the	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As proder according to the creditor's name.  Describe the property that secures the claim:  Contact Chevy Cruze 68,000 miles  Car  Sof the date you file, the claim is: Check all that ply.  Contingent Unliquidated Disputed Contact Check all that apply.	Amount of claim Do not deduct the value of collateral. \$12,679.00	Value of collateral that supports this claim	Unsecured portion If any
2. List for each much 2.1	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union  Creditor's Name  Attn: Bankruptcy De 230 W Monroe St Suite2850  Chicago, IL 60606  Number, Street, City, State & Zip owes the debt? Check one ebtor 1 only	editor has more reditor has a paralphabetical of the paralphabetical	e than one secured claim, list the creditor separate carticular claim, list the other creditors in Part 2. As proder according to the creditor's name.  escribe the property that secures the claim:  012 Chevy Cruze 68,000 miles  Car  s of the date you file, the claim is: Check all that ply.  1 Contingent 1 Unliquidated 1 Disputed ature of lien. Check all that apply.  1 An agreement you made (such as mortgage or separate carries).	Amount of claim Do not deduct the value of collateral. \$12,679.00	Value of collateral that supports this claim	Unsecured portion If any
Who	st all secured claims. If a creach claim. If more than one con as possible, list the claims in First Northern Credit Union  Creditor's Name  Attn: Bankruptcy De 230 W Monroe St Suite2850  Chicago, IL 60606  Number, Street, City, State & Zip owes the debt? Check one ebtor 1 only ebtor 2 only	pt.  Code  C	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As proder according to the creditor's name.  Describe the property that secures the claim:  D12 Chevy Cruze 68,000 miles  Car  S of the date you file, the claim is: Check all that ply.  Contingent Unliquidated Disputed  ature of lien. Check all that apply.  An agreement you made (such as mortgage or sear loan)	Amount of claim Do not deduct the value of collateral. \$12,679.00	Value of collateral that supports this claim	Unsecured portion If any
Who	st all secured claims. If a creach claim. If more than one can as possible, list the claims in First Northern Credit Union Creditor's Name Attn: Bankruptcy De 230 W Monroe St Suite2850 Chicago, IL 60606 Number, Street, City, State & Zip owes the debt? Check one ebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only	pt.  Code  Code  another	e than one secured claim, list the creditor separate particular claim, list the other creditors in Part 2. As proder according to the creditor's name.  D12 Chevy Cruze 68,000 miles  ar  s of the date you file, the claim is: Check all that ply.  Contingent Unliquidated Disputed Disp	Amount of claim Do not deduct the value of collateral. \$12,679.00	Value of collateral that supports this claim	Unsecured portion If any

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$12,679.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Document Page 18 of 50 Fill in this information to identify your case: Debtor 1 Artasia Leonard First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount 2.1 IRS \$1,500.00 \$1,500.00 \$0.00 Last 4 digits of account number Priority Creditor's Name **Centralized Insolvency Operation** When was the debt incurred? 2014-2015 PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only □ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **Tax Debt** Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more

Total claim

Part 2.

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of

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Debtor 1 Artasia Leonard Case number (if know) 4.1 \$11,675.00 **Citizens Finance** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 05/2016 6457 N 2nd St Loves Park, IL 61111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes Repossession Other. Specify 4.2 **Crusader Clinic** Last 4 digits of account number \$1,117.44 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 09/2015 1200 W. State St. Rockford, IL 61102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.3 Dept of Ed/Navient \$2,912.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 02/2015 PO Box 9635 Wilkes Barre, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Student Loans

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	Altasia Leoliaiu		
4.4	First Northern Credit Union  Nonpriority Creditor's Name	Last 4 digits of account number	\$481.00
	Attn: Bankruptcy Dept. 230 W Monroe St Suite2850	When was the debt incurred? 04/2016	
	Chicago, IL 60606  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.5	Freeport Memorial Hospital	Last 4 digits of account number	\$2,300.00
	Nonpriority Creditor's Name		<del></del>
	c/o Tri States Adjustment Freeport PO Box 882	When was the debt incurred? 02/2014	
	Freeport, IL 61032-0882  Number Street City State Zlp Code	As of the date year file the claim in Oberel, all that are he	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.6	Hoights Finance Corn	Last 4 digits of account number	\$1,176.00
4.0	Heights Finance Corp.  Nonpriority Creditor's Name	Last 4 digits of account number	\$1,176.00
	Attn: Bankruptcy Dept. 7707 N. Knoxville Ave #201	When was the debt incurred? 11/2009	
	Peoria, IL 61614  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Personal Loan	
	· <del>·</del>	— Girot. Opecity	

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Debtor 1 Artasia Leonard Case number (if know) 4.7 \$787.00 Infininty Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 02/2016 PO Box 4545 Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No **Medical Debt** ☐ Yes Other. Specify 4.8 **Personal Finance** Last 4 digits of account number \$1,001.00 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 03/2015 270 North Mulford Rd. Rockford, IL 61107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Perosnal Loan** Other. Specify 4.9 \$1,866.54 **Rockford Health Physicians** Last 4 digits of account number Nonpriority Creditor's Name 11/2015 Attn Bankruptcy Dept. When was the debt incurred? Department 4701 Carol Stream, IL 60122-4701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical Debt

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Debtor 1 Artasia Leonard Case number (if know) 4.1 **Rockford Health System** \$3,526.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Dept. 11/2015 When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Dept 4.1 **Rockford Memorial** \$5,200.00 Last 4 digits of account number Nonpriority Creditor's Name 08/2015 Attn: Bankruptcy Dept. When was the debt incurred? 2400 N Rockton Ave Rockford, IL 61103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.1 Rockford Radiology \$305.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 04/2014 2400 N Rockton Ave Rockford, IL 61103 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes

Official Form 106 E/F

Document Page 23 of 50 Case number (if know) Debtor 1 Artasia Leonard 4.1 Sprint \$926.00 Last 4 digits of account number 3 Nonpriority Creditor's Name KSOPHT0101-Z4300 12/2015 When was the debt incurred? 6391 Sprint Parkway Overland Park, KS 66251 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Utilities 4.1 Swedish American Medical Group \$2,640.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 03/2016 PO Box 1567 Rockford, IL 61110 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Debt** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Commonwealth Financial** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims 245 Main St. Scranton, PA 18519 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Creditors Protection Service** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims PO Box 4115 Rockford, IL 61101 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Diversified Consultants** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Dept. Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

PO Box 551268 Jacksonville, FL 32255

Last 4 digits of account number

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Debtor 1 Artasia Leonard		Case number (if know)
Name and Address Equifax PO Box 740256	On which entry in Part 1 or Pa Line <b>4.1</b> of ( <i>Check one</i> ):	art 2 did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta, GA 30374	Last 4 digits of account number	• •
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Experian	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 4500 Allen, TX 75013		■ Part 2: Creditors with Nonpriority Unsecured Claims
Allen, TX 75015	Last 4 digits of account number	er
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Rockford Mercantile Agency	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: BAnkruptcy Dept. PO Box 5847		Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61125	Last 4 digits of account number	er
Name and Address	On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Rockford Mercantile Agency	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: BAnkruptcy Dept. PO Box 5847		Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61125		
	Last 4 digits of account number	er
Name and Address		art 2 did you list the original creditor?
Rockford Mercantile Agency Attn: BAnkruptcy Dept.	Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
PO Box 5847		■ Part 2: Creditors with Nonpriority Unsecured Claims
Rockford, IL 61125		
	Last 4 digits of account number	er
Name and Address		art 2 did you list the original creditor?
TransUnion 555 West Adams Street	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Chicago, IL 60661		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	er

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,500.00
				1	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that			0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	35,912.98
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	35,912.98

		17000000	111 FAUE 7.3 01 30	
Fill in this infor	mation to identify your	case:		
Debtor 1	Artasia Leonard			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Check if this is an

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	٠,		<b>3.</b> 3		

		Document	Page 26 of 5	50	-
Fill in this i	nformation to identify your o				
Debtor 1	Artasia Leonard				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case number	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Code	ebtors			12/15
people are fi fill it out, and your name a	iling together, both are equal dinumber the entries in the land case number (if known).	ally responsible for supplying boxes on the left. Attach the A	correct information Additional Page to th	. If more space is nis page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. DO yo	ou have any codebions? (II y	ou are ning a joint case, do not	l list either spouse as	a codebior.	
□ No ■ Yes					
		lived in a community property Nevada, New Mexico, Puerto R			
	Go to line 3. Did your spouse, former spou	se, or legal equivalent live with	you at the time?		
in line 2	2 again as a codebtor only if 06D), Schedule E/F (Official	that person is a guarantor or	cosigner. Make sur	e you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	olumn 1: Your codebtor ame, Number, Street, City, State and ZIF	<sup>2</sup> Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1 <b>D</b>	ominique Clemens			☐ Schedule D,☐ Schedule E/F☐ Schedule G	-, line

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Fill	in this information to identify your ca	ase:									
Del	otor 1 Artasia Leoi	nard			_						
	otor 2 puse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_						
(If kr	fficial Form 106l	ome	-			☐ An ☐ A s		d filing ent showin as of the fo		petition chapter g date: <b>12/1</b>	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  **T 1: Describe Employment**	are married and not filing wi	ng jointly, and your sith you, do not include	spouse i de inforr	s liv natio	ing with y on about y	ou, inclu our spo	ude inforr ouse. If m	nation ore spa	about your ace is needed,	
1.	Fill in your employment information.		Debtor 1			1	Debtor 2	or non-fi	iling sp	ouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Emplo	oyed			
	attach a separate page with information about additional	Employment status	☐ Not employed				□ Not e	mployed			
	employers.	Occupation	DSP								
	Include part-time, seasonal, or self-employed work.	Employer's name	Milestone								
	Occupation may include student or homemaker, if it applies.	Employer's address	3310 Searles AVe Rockford, IL 61101								
		How long employed to	here? Five Ye	ars			_				
Pai	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any l	line, write S	\$0 in the	space. In	clude yo	our non-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for th	nat perso	n on the li	nes bel	ow. If you need	l
						For Debt	or 1	For De	btor 2 d		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,4	157.26	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

3,457.26

N/A

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Debt	or 1	Artasia Leonard	-	С	ase	number ( <i>if kr</i>	own)				
					For	Debtor 1			r Debtor n-filing s		
	Cop	by line 4 here	4.	_	\$	3,457	.26	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	1.	\$	546	6.61	\$		N/A	<b>\</b>
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c	:.	\$		.00	\$		N/A	<del>-</del>
	5d.	Required repayments of retirement fund loans	5d	l.	\$	(	.00	\$		N/A	<u></u>
	5e.	Insurance	5e		\$	(	.00	\$_		N/A	<u>\</u>
	5f.	Domestic support obligations	5f.		\$		.00	. \$_		N/A	_
	5g.	Union dues	5g	•	\$		.67	\$_		N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$		0.00	+ \$_		N/A	<u>\</u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		.28	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	:	\$	2,875	.98	. \$_		N/A	<u>\</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90		\$	,		¢		<b>N</b> 1/4	
	8b.	Interest and dividends	8a 8b		\$ _		).00 ).00	*		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			· —			· · · –		-	_
	8d.	settlement, and property settlement. Unemployment compensation	8c 8d		\$_ \$		).00 ).00	*		N/A N/A	_
	8e.	Social Security	8e		<sub>\$</sub> —		0.00	· \$_		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$		0.00	\$_		N/A	
	8g.	Pension or retirement income	8g	,	\$		0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$	(	0.00	+		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		C	0.00	\$_		N/	Ά
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	•	2,875.98	+ \$		N/A	= \$	2,875.98
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		2,070.00			1473		2,070.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe					•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies							e. 12.	\$	2,875.98
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						'	Comb	ined Ily income
	_	Vac Evolain:									

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informat	tion to identify yo	our case:					
	tor 1	Artasia Leon				Ch	eck if this is:	
		Ai tasia Leoi	iaiu				An amended filing	•
	tor 2 ouse, if filing)							owing postpetition chapter of the following date:
Unit	ed States Bankr	uptcy Court for the	· NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
		uptoy Court for the		ILLANDIOTINOT OF ILLAND			, 55,	
1	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/15
info	ormation. If m	and accurate as ore space is ne n). Answer ever	eded, atta	. If two married people anch ich another sheet to this n.	re filing together, b form. On the top of	oth are eq f any addi	ually responsible tional pages, write	for supplying correct your name and case
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a join	t case?						
	■ No. Go to		in a canar	ate household?				
	☐ Yes. <b>Doe</b>		ın a separ	ate nousenoid?				
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						_
								□ No □ Yes
							<del></del>	_
								☐ Yes
								_ □ No
	_							_ Yes
3.	expenses of	enses include f people other to d your depende	han $_{m \sqcap}$	No Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	ly Fynenses				
Est exp	imate your ex	penses as of yo	our bankr	uptcy filing date unless y				napter 13 case to report of the form and fill in the
the	lude expense value of such ficial Form 10	n assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> Y	f you know Your Income		Your ex	penses
•		•						
4.		r home owners ad any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	610.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	20.00
				upkeep expenses		4c.	·	50.00
5.		owner's associat nortgage payme		dominium dues <b>our residence,</b> such as ho	me equity loans	4d. 5.		0.00 0.00
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Debtor 1	Artasia Leonard	Case num	ber (if known)	
6. <b>Uti</b>	lities:			
6a.		6a.	\$	115.00
6b.	•	6b.	\$	25.00
6c.		6c.	·	250.00
6d.		6d.	·	0.00
	od and housekeeping supplies	7.	\$	425.00
	ildcare and children's education costs	8.	\$	0.00
_	othing, laundry, and dry cleaning	9.	\$	115.00
	rsonal care products and services	10.	\$	
	•		·	125.00
	dical and dental expenses	11.	\$	70.00
	Insportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	300.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	·	60.00
	aritable contributions and religious donations	14.	· -	0.00
	urance.	14.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
	b. Health insurance	15b.	·	0.00
	c. Vehicle insurance	15c.	·	115.00
	d. Other insurance. Specify:	15d.		0.00
	<b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	ecify: Back Taxes	16.	\$	50.00
	tallment or lease payments:		_	
	a. Car payments for Vehicle 1	17a.	· -	290.27
	o. Car payments for Vehicle 2	17b.	·	0.00
170	c. Other. Specify:	17c.	*	0.00
	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report a		Φ.	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.	·	
	ner payments you make to support others who do not live with you.	40	\$	0.00
	ecify:	19.	Incomo	
	ner real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> a. Mortgages on other property	20a.		0.00
			·	0.00
	o. Real estate taxes	20b.	·	0.00
	c. Property, homeowner's, or renter's insurance	20c.	•	0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
	e. Homeowner's association or condominium dues	20e.	·	0.00
. Oth	ner: Specify: Birthdays/Holidays/Haircuts	21.	+\$	150.00
	culate your monthly expenses			
228	a. Add lines 4 through 21.		\$	2,770.27
22b	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,770.27
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	culate your monthly net income.	00-	œ.	0.075.00
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,875.98
23k	o. Copy your monthly expenses from line 22c above.	23b.	-\$	2,770.27
230	c. Subtract your monthly expenses from your monthly income.			405 = 4
	The result is your monthly net income.	23c.	\$	105.71
	you expect an increase or decrease in your expenses within the year after y			
	example, do you expect to finish paying for your car loan within the year or do you expect you dification to the terms of your mortgage?	ur mortgage p	payment to increase	or decrease because o
	No.			
	Yes. Explain here:			

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Fill in this info	rmation to identify your	case:						
Debtor 1	Artasia Leonard							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number					☐ Check if this is an			
(					amended filing			
					ŭ			
Official For	m 106Dec							
		امينامانيناميرما	Dobtorio Col	aadulaa				
Declara	tion About a	in individual	Debtor's Sch	iedules	12/15			
If two married p	eople are filing togethe	r, both are equally respo	nsible for supplying corre	ect information.				
obtaining mone		n connection with a ban			ement, concealing property, or 00, or imprisonment for up to 20			
Sig	gn Below							
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?				
■ No								
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119)			
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							

X /s/ Artasia Leonard

Artasia Leonard Signature of Debtor 1

Date July 15, 2016

Signature of Debtor 2

Date

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Debtor 1 Artasia Leonard First Name							
Debtor 2   Government   Minde Name   Last Name   Last Name   Covernment   Covernmen	Fill	in this inform	nation to identify you	r case:			
Debtor 2   Segment High   File Nime   Middle Name   Last Name	Deb	otor 1		Middle Name	Last Nama		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number	Deb	otor 2	i iist ivaine	Widdle Name	Last Name		
Case number   Check if this is an amended filling    Official Form 107  Statement of Financial Affairs for Individuals Filling for Bankruptcy    Affairs for Individuals Filling for Individ			First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy  ###################################	Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Fart 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  2. During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address:  Debtor 2 Prior Address:  Dates Debtor 1 Debtor 2 Prior Address:  Dates Debtor 1 Prior Prior Address:  Dates Debtor 1	Cas	se number					
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Fart 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  Not married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  Debtor 1 Prior Address:  Dates Debtor 1  Ilived there  2715 City View Court #103  From-To:  Rockford, IL 61103  From-To:  Same as Debtor 1  Ilived there  2715 City View Court #103  Rockford, IL 61103  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Artzona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes, Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  1 Debtor 1  Sources of Income Check all that apply.  Donues, tips  Donues, tips  Wages, commissions, bonuese, tips	(if kn	own)				_	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before							imended filing
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before	∩f	ficial Ear	rm 107				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part				Affairs for Individ	duals Filing for B	ankruptcy	4/16
1. What is your current marital status?    Married   Not married   Not married   No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.   Debtor 1 Prior Address:   Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   Debtor 1   Debtor 2 Prior Address:   Dates Debtor 1   Same as Debtor 1   From-To: 1   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 2   Same as Debtor 3   Same as Debtor 4   Same as Debtor 5   Same as Debtor 6   Same as Debtor 7   Same as Debtor 9   Same as Debtor 1   Same as Debtor 2   Same as Debtor 1   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 2   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3   Same as Debtor 4   Same as Debtor 2   Same as Debtor 3   Same as Debtor 4	Be a	s complete a	nd accurate as poss ore space is needed,	ble. If two married people a attach a separate sheet to	are filing together, both are	equally responsible for sup	plying correct
Married   Not married	Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
No   No   Yes. List all of the places you lived anywhere other than where you live now?    No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1 Prior Address:   Dates Debtor 1   Ilved there   Debtor 2 Prior Address:   Dates Debtor 2   Ilved there   Description   Same as Debtor 1   Sources of Income   Same as Debtor 2   Sources of Income   Same as Debtor 3   Sources of Income   Same as Debtor 4   Sources of Income   Same as Debtor 4   Same as Debtor 5   Same as Debtor 1   Same as Debt	1.	What is your	current marital statu	is?			
2. During the last 3 years, have you lived anywhere other than where you live now?    No   Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1 Prior Address:   Dates Debtor 1   lived there   Debtor 2 Prior Address:   Dates Debtor 2   lived there   2715 City View Court #103   From-To:   Same as Debtor 1   From-To:   Same as Debtor 1   Same as Debtor 1   Same as Debtor 1   Same as Debtor 1   Prom-To:   Same as Debtor 1   Same as Debtor 2   Same as Debtor 1   Same as Debtor 2   Same as Debtor 1   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 2   Same as Debtor 2   Same as Debtor 2   Same as Debtor 1   Same as Debtor 1   Same as Debtor 2   Same as Debtor 3   Same as Debtor 3   Same as Debtor 4   Same as Debtor 3   Same as Debtor 4   Same as Debtor 4   Same as Debtor 3   Same as Debtor 4   Same as Deb		☐ Married					
□ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: □ Dates Debtor 1 □ Ived there □ 2715 City View Court #103 □ Rockford, IL 61103 □ From-To: □ Same as Debtor 1 □ From-To: □ Same as Debtor 1 □ No □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 □ Explain the Sources of Your Income  4. Did you have any income from employment or from operating a businessed suring this year or the two previous calendar years? □ Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ No □ Yes. Fill in the details. □ Debtor 1 □ Sources of income □ Check all that apply. □ Debtor 2 □ Sources of income □ Check all that apply. □ Sources of income □ Check all that apply. □ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips		■ Not mar	ried				
Pebtor 1 Prior Address:  Dates Debtor 1  Iived there  2715 City View Court #103  Rockford, IL 61103  Debtor 1 Prior Address:  Dates Debtor 1  Iived there  2715 City View Court #103  Rockford, IL 61103  Prom-To:  1/2011 - 5/2016  Same as Debtor 1  From-To:  Same as Debtor 1  From-To:  Prom-To:  Rockford, IL 61103  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Pess. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  4. Did you have any income from employment or from operating a businessed uring this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Check all that apply.  Sources of income Check all that apply.  Wages, commissions, bonuses, tips  \$16,000.00  Wages, commissions, bonuses, tips	2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
Debtor 1 Prior Address:    Dates Debtor 1   Ilved there   Debtor 2 Prior Address:   Dates Debtor 2   Ilved there   Debtor 2 Prior Address:   Dates Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 6   Debtor 6   Debtor 7   Debtor 7   Debtor 8   Debtor 9   Debtor 9   Debtor 9   Debtor 9   Debtor 9   Debtor 1   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 6   Debtor 8   Debtor 1   Debtor 9   Debtor		□ No					
lived there   2715 City View Court #103   From-To:		Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
2715 City View Court #103 Rockford, IL 61103  From-To: 1/2011 - 5/2016  Same as Debtor 1 From-To: 1/2011 - 5/2016  Same as Debtor 1 From-To: From-To: 1/2011 - 5/2016  Same as Debtor 1 From-To: From-To: From-To:  Same as Debtor 1 From-To:		Debtor 1 Pri	ior Address:		Debtor 2 Prior Ac	Idress:	
Rockford, IL 61103  1/2011 - 5/2016  From-To:    From-To:		2715 City \	View Court #103		По ви		
States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips						1	
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$16,000.00  Wages, commissions, bonuses, tips		es and territorio	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Debtor 2  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Wages, commissions, bonuses, tips	Par	t 2 Explain	n the Sources of You	r Income			
Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$16,000.00  Wages, commissions, bonuses, tips  \$16,000.00	4.	Fill in the tota	I amount of income yo	u received from all jobs and a	all businesses, including part	-time activities.	ndar years?
Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Flags, commissions, bonuses, tips  Sources of income (before deductions and exclusions)  Wages, commissions, bonuses, tips		□ No					
Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$16,000.00		Yes. Fill	in the details.				
Check all that apply.  Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:  Standard Research  Wages, commissions, bonuses, tips  The date you filed for bankruptcy:  Standard Research  Standard R				Debtor 1		Debtor 2	
the date you filed for bankruptcy:  bonuses, tips  bonuses, tips					(before deductions and		(before deductions
☐ Operating a business ☐ Operating a business					\$16,000.00		
				☐ Operating a business		☐ Operating a business	

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				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		ndar year: December	31, 2015 )	■ Wages, commissions, bonuses, tips	\$25,030.02	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		ndar year be December		■ Wages, commissions, bonuses, tips	\$25,000.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
5.	Include ir and other winnings.  List each	come regard public bene If you are fil	dless of whetl fit payments; ling a joint ca: the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separat	imples of other income are a est; dividends; money collector ou received together, list it	alimony; child supp cted from lawsuits; only once under De	royalties; ar ebtor 1.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
).	□ No.	Neither D individual	ebtor 1 nor I primarily for a 90 days befo Go to line 7		mer debts. Consumer deb d purpose." d you pay any creditor a tota	al of \$6,425* or mo	re?	
			paid that con not include	each creditor to whom you paid reditor. Do not include paymen payments to an attorney for that ton 4/01/19 and every 3 years	its for domestic support obli his bankruptcy case.	gations, such as ch	ild support	and alimony. Also, do
	■ Yes			or both have primarily consu ore you filed for bankruptcy, did		al of \$600 or more?		
		□ No.	Go to line 7	7.				
		■ Yes	include pay	each creditor to whom you paid ments for domestic support ob r this bankruptcy case.				
	Credito	's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for
	Attn: B 230 W	ankruptcy	Suite2850	Monthly	\$876.06	\$12,500.00		Card Repayment ers or vendors

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In of a	Vithin 1 year before you filed for bankruptc siders include your relatives; any general part which you are an officer, director, person in a business you operate as a sole proprietor. 11 imony.	rtners; relatives of any gen- control, or owner of 20% or	eral partners; partners of their voting	erships of which yo g securities; and ar	u are a general ny managing ag	I partner; corporations gent, including one for		
	No							
	Yes. List all payments to an insider.							
I	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment		
in	fithin 1 year before you filed for bankrupto sider? clude payments on debts guaranteed or cosi		ments or transfer a	any property on a	ccount of a de	bt that benefited an		
	No							
	Yes. List all payments to an insider							
I	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	this payment tor's name		
Part 4	: Identify Legal Actions, Repossession	s, and Foreclosures						
m E	st all such matters, including personal injury of odifications, and contract disputes.  No Yes. Fill in the details.  Case title  Case number	Nature of the case	Court or agency	n suits, paternity a	Status of the	·		
	•		rty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?		
_	Yes. Fill in the information below.	<b>D</b> " ( <b>D</b> (		·				
(	Creditor Name and Address	Describe the Property  Explain what happened	l	Date	Value of the property			
	Citizens Finance Attn: Bankruptcy Dept.	2009 Toyota Camry		04/20	04/2016 \$1,398.00			
6	6457 N 2nd St Loves Park, IL 61111	57 N 2nd St ■ Property was repossessed.						
		☐ Property was attached	d, seized or levied.					
	fithin 90 days before you filed for bankrup counts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fir	nancial institution	ı, set off any aı	mounts from your		
_	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount		
C	fithin 1 year before you filed for bankrupto ourt-appointed receiver, a custodian, or ar I No		rty in the possess			fit of creditors, a		

Yes

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Pai	t 5: List Certain Gifts and Contributions	3							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and	)	Describe the gifts	Dates you gave the gifts	Value				
	Address:								
14.	Within 2 years before you filed for bankru  ■ No  □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?				
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	otal	Describe what you contributed	Dates you contributed	Value				
Pai	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No								
	Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred  Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			Date of your loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104		Legal Fees	07/2016	\$500.00				
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	itors o		or transfer any prope	rty to anyone who				
	■ No								
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

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Debtor 1 Artasia Leonard

8.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	airs? he granting of a					
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v property transferr		payme	ibe any property or ents received or debts n exchange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a	self-settle	d trust or similar device o	of which you are a		
	Yes. Fill in the details.							
	Name of trust	Description and v	ralue of the pro	perty trans	ferred	Date Transfer was made		
Dar	t 8: List of Certain Financial Accounts, In:	struments Safe Denosit	Boyes and St	orage Unit	e			
ıaı	List of Certain Financial Accounts, in	struments, sale Deposit	boxes, and st	orage onit	5			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, or	•				, ,		
	houses, pension funds, cooperatives, asso				,,	c., 2. cc.ugc		
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, ar	ny safe dep	oosit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
Dar	t 9: Identify Property You Hold or Control	for Someone Fise						
ı aı	identify Property Tou Hold of Control	TOT SOMEONE LISE						
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ude any properi	ty you borr	owed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Info	ormation						
or	the purpose of Part 10. the following definiti							

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 16-81701 Doc 1 Filed 07/15/16 Entered 07/15/16 15:37:56 Desc Main Page 37 of 50 Case number (if known) Document

Debtor 1 **Artasia Leonard** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	hazardous material means anything an environmental law defines as a nazardous waste, nazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	all notices, releases, and proceedings th	at you know about, regardless of whe	n the	y occurred.				
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable	e und	ler or in violation of an environme	ental law?			
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ar ZIP Code)	nd	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or ad	ministrative proceeding under any env	ironn	nental law? Include settlements a	nd orders.			
		■ No □ Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	t 11	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have a	ny of	the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No. None of the above applies. Go to Part 12.								
	Address		Describe the nature of the business						
			Name of accountant or bookkeeper		Do not include Social Security in Dates business existed	number or IIIN.			
28.		hin 2 years before you filed for bankrup titutions, creditors, or other parties.	tcy, did you give a financial statement	to an	nyone about your business? Inclu	de all financial			
		No							
		Yes. Fill in the details below.	P						
	Ad	me  dress  mber, Street, City, State and ZIP Code)	Date Issued						

Part 12: Sign Below

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Case number (if known) Document

Debtor 1 Artasia Leonard

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Artasia Leonard	
Artasia Leonard	Signature of Debtor 2
Signature of Debtor 1	
Date July 15, 2016	Date
Did you attach additional	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
☐ Yes	
Did you pay or agree to p	ay someone who is not an attorney to help you fill out bankruptcy forms?
No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Artasia Leonard			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
		Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
			viduals Filing Under C	hapter 7 12/15
	e claims secured by yo	-	in out ting form in.	
you have least	sed personal property a is form with the court w ever is earlier, unless th	and the lease has n vithin 30 days after	not expired. you file your bankruptcy petition or by the le time for cause. You must also send co	
	eople are filing togethe nd date the form.	r in a joint case, bo	oth are equally responsible for supplying	correct information. Both debtors must
	and accurate as possibour name and case nu		s needed, attach a separate sheet to this	form. On the top of any additional pages,
Part 1: List Y	our Creditors Who Hav	e Secured Claims		
1. For any credit	ors that you listed in P	art 1 of Schedule [	): Creditors Who Have Claims Secured by	Property (Official Form 106D), fill in the
information be	elow.			
Identify the cr	editor and the property t	hat is collateral	What do you intend to do with the prosecures a debt?	perty that Did you claim the property as exempt on Schedule C?
			Secures a debt:	as exempt on deficulte of
Creditor's F	First Northern Credit	Union	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of	2012 Chevy Cruze	68 000 miles	Retain the property and enter into a	■ Yes
property	Car	00,000 iiiies	Reaffirmation Agreement.	
securing debt			☐ Retain the property and [explain]:	
555ag 4554	•			
Part 2: List Y	our Unexpired Persona	I Property Leases		
				Unexpired Leases (Official Form 106G), fill
			nexpired leases are leases that are still in the trustee does not assume it. 11 U.S.C.	effect; the lease period has not yet ended. 8 365(n)(2)
rou may assum	e an unexpired personi	ii property lease ii	the trustee does not assume it. 11 0.0.0.	3 303(p)(2).
Describe your u	unexpired personal pro	perty leases		Will the lease be assumed?
				_
Lessor's name: Description of le	asad			□ No
Property:	aseu			☐ Yes
				<b>—</b> 103
Lessor's name:				□ No
Description of le	ased			_
Property:				☐ Yes
Lessor's name:				□ No

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

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Debt	or 1	Artasia Leonard	Case number (if known)	
	•	n of leased		_
Prop	erty:			☐ Yes
	or's na	ame: n of leased	I	□ No
Prop		1 01 100000	I	□ Yes
	or's na	ame: n of leased	ı	□ No
Prop		Torreased	I	□ Yes
	or's na	ame: n of leased	J	□ No
Prop	•	Torreased	I	□ Yes
	or's na		1	□ No
Prop		n of leased		☐ Yes
Part	3: \$	Sign Below		
		alty of perjury, I declare that I ha at is subject to an unexpired lea	e indicated my intention about any property of my estate that sec e.	ures a debt and any personal
X	/s/ Aı	rtasia Leonard	X	
-		sia Leonard	Signature of Debtor 2	
	Signa	ture of Debtor 1		
	Date	July 15, 2016	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81701 Doc 1 Filed 07/15/16 Entered 07/15/16 15:37:56 Desc Main Document Page 45 of 50

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In re	Artasia Leonard		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMP	ENSATION OF ATTOR	NEY FOR D	EBTOR(S)		
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the five rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be pai	d to me, for services reno	dered or to	
	For legal services, I have agreed to accept		\$	500.00		
	Prior to the filing of this statement I have receive	ed	s	500.00		
				0.00		
2. 7	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mer	nbers and associates of r	ny law firm.	
	☐ I have agreed to share the above-disclosed compecopy of the agreement, together with a list of the				v firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
t c	<ul> <li>Analysis of the debtor's financial situation, and rerest.</li> <li>Preparation and filing of any petition, schedules, so Representation of the debtor at the meeting of credit. [Other provisions as needed]         Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured creditors to reaffirmation agreements and applications.     </li> </ul>	statement of affairs and plan which ditors and confirmation hearing, an o reduce to market value; exe tions as needed; preparation	may be required; d any adjourned he mption planning	arings thereof;  g; preparation and fill	ing of	
6. I	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any of any other adversary proceeding.			ces, relief from stay a	actions or	
		CERTIFICATION				
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of the deb	otor(s) in	
Ju	uly 15, 2016	/s/ Daniel A. Sprir			_	
$D_{i}$	ate	Daniel A. Springe Signature of Attorne				
		Springer Law Firr				
		2222 E State St				
		Suite 107 Rockford, IL 6110	4			
		815.312.4725	•			
		dspringerlaw@gn	nail.com		_	
		Name of law firm				

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Springer Law Firm

2222 East State St. # 107, Rockford, IL

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815.312.4275

#### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
  include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
  Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
  information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 7/15/16

Signature:

Print Name: Atasim leanand

Attorney Signature:

Attorney Print:

#### **United States Bankruptcy Court** Northern District of Illinois

In re	Artasia Leonard		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR N	MATRIX	
		Number of	f Creditors:	22
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	itors is true and correct to tl	ne best of my
Date:	July 15, 2016	/s/ Artasia Leonard Artasia Leonard Signature of Debtor		

Citizens Finance Attn: Bankruptcy Dept. 6457 N 2nd St Loves Park, IL 61111

Commonwealth Financial Attn: Bankruptcy Dept. 245 Main St. Scranton, PA 18519

Creditors Protection Service Attn: Bankruptcy Dept. PO Box 4115 Rockford, IL 61101

Crusader Clinic Attn: Bankruptcy Dept. 1200 W. State St. Rockford, IL 61102

Dept of Ed/Navient PO Box 9635 Wilkes Barre, PA 18773

Diversified Consultants Attn: Bankruptcy Dept. PO Box 551268 Jacksonville, FL 32255

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

First Northern Credit Union Attn: Bankruptcy Dept. 230 W Monroe St Suite2850 Chicago, IL 60606

Freeport Memorial Hospital c/o Tri States Adjustment Freeport PO Box 882 Freeport, IL 61032-0882 Heights Finance Corp. Attn: Bankruptcy Dept. 7707 N. Knoxville Ave #201 Peoria, IL 61614

Infininty Attn: Bankruptcy Dept. PO Box 4545 Madison, WI 53716

IRS Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

Personal Finance Attn: Bankruptcy Dept. 270 North Mulford Rd. Rockford, IL 61107

Rockford Health Physicians Attn Bankruptcy Dept. Department 4701 Carol Stream, IL 60122-4701

Rockford Health System Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Memorial Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

Rockford Mercantile Agency Attn: BAnkruptcy Dept. PO Box 5847 Rockford, IL 61125

Rockford Radiology Attn: Bankruptcy Dept. 2400 N Rockton Ave Rockford, IL 61103

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Sprint KSOPHT0101-Z4300 6391 Sprint Parkway Overland Park, KS 66251

Swedish American Medical Group Attn: Bankruptcy Dept. PO Box 1567 Rockford, IL 61110

TransUnion 555 West Adams Street Chicago, IL 60661